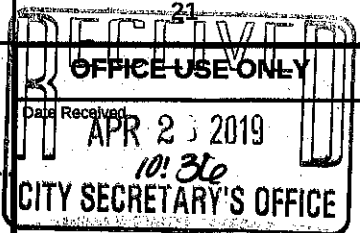


CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID		2 Total pages filed: 21	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI		
		Vanessa			
	NICKNAME	LAST	SUFFIX		
		Steinkamp			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;			ZIP CODE	
	1313 Ashford Court				
	Colleyville, TX 76034				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI		Date Hand-delivered or Date Postmarked
		Frederick C.			
	NICKNAME	LAST	SUFFIX		Receipt #
		Tate			Amount
	Date Processed				
	Date Imaged				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE				
	1005 Glade Road, Suite 145, Colleyville, TX 76034				
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
		(214) 405-7719			
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month Day Year
	03	26	2019		04/24/2019
10 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
	05/04/2019				
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)	
	None Tarrant			Colleyville City Council Place 2	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

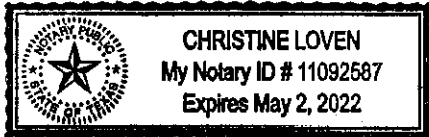
FORM C/OH
COVER SHEET PG 2
2 of 21

13 C / OH NAME Steinkamp, Vanessa	14 Filer ID
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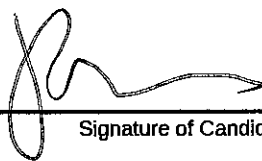
15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	
	<input type="checkbox"/> SPECIFIC	
		COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,462.91
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	11,563.39
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	9,393.73
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1.00

17 AFFADAVIT

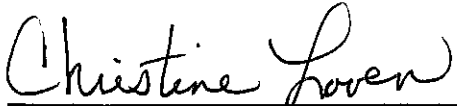


I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.


 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Vanessa Steinkamp, this the 21st day of April, 2019, to certify which, witness my hand and seal of office.


 Signature of officer administering

Christine Loven
 Printed name of officer administering

Notary
 Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

3 of 21

18 FILER NAME Steinkamp, Vanessa	19 Filer ID
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20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,125.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 337.91
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 3,305.67
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 180.78
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 8,076.94
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.39

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/4 Rpt: 4/21
2 FILER NAME Steinkamp, Vanessa		3 Filer ID
4 Date 04/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abell, Rachel <hr/> 6 Contributor address; City; State; Zip Code 2716 Devonshire Court Colleyville, TX 66034	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/31/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deakin, Karen <hr/> Contributor address; City; State; Zip Code 4828 Lakeside Drive Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/31/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deakin, Michael <hr/> Contributor address; City; State; Zip Code 4828 Lakeside Drive Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/12/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Dawn <hr/> Contributor address; City; State; Zip Code 2804 Walnut Lane Hurst, TX 76054	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Kastner Land Services
Date 04/08/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dove, James <hr/> Contributor address; City; State; Zip Code 800 Colleyville Terrace Colleyville, TX 76034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 2/4 Rpt: 5/21

2 FILER NAME

Steinkamp, Vanessa

3 Filer ID

4 Date
04/20/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Goldsberry, Jenyphr

7 Amount of Contribution (\$)

\$50.00

6 Contributor address; City; State; Zip Code

204 Mill Wood Drive

Colleyville, TX 76034

8 Principal occupation / Job title (See Instructions)

Nurse

9 Employer (See Instructions)

Self-Employed

Date
04/12/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Hill, Sarah

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

1000 Woodvale Court

Colleyville, TX 76034

Principal occupation / Job title (See Instructions)

Professor

Employer (See Instructions)

TCU

Date
03/30/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Houston, Steve

Amount of Contribution (\$)

\$50.00

Contributor address; City; State; Zip Code

2907 Edgewood Lane

Colleyville, TX 76034

Principal occupation / Job title (See Instructions)

Sales Manger

Employer (See Instructions)

Follett Corporation

Date
03/28/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lewis, Patricia

Amount of Contribution (\$)

\$300.00

Contributor address; City; State; Zip Code

209 Oaklawn Drive

Colleyville, TX 76034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/26/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Makens, James

Amount of Contribution (\$)

\$200.00

Contributor address; City; State; Zip Code

1312 Somerset Court

Colleyville, TX 76034

Principal occupation / Job title (See Instructions)

President

Employer (See Instructions)

AV Water, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/21
2 FILER NAME Steinkamp, Vanessa		3 Filer ID
4 Date 04/05/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mavis, Beverly <hr/> 6 Contributor address; City; State; Zip Code 4301 Greenmeadow East Colleyville, TX 76034	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Homemaker
Date 03/30/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCollum, Ana <hr/> Contributor address; City; State; Zip Code 6108 Burnham Circle Colleyville, TX 76034	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Legacy Bank
Date 04/17/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parikh, Manisha <hr/> Contributor address; City; State; Zip Code 4900 Rockrimmon Court Colleyville, TX 76034	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) USMD
Date 03/31/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pederson, Gina <hr/> Contributor address; City; State; Zip Code 3001 Matterhorn Drive Bedford, TX 76021	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/03/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swaim, Bobby <hr/> Contributor address; City; State; Zip Code PO Box 8 Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 4/4 Rpt: 7/21

2 FILER NAME

Steinkamp, Vanessa

3 Filer ID

4 Date
04/13/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Turner, Lanese

7 Amount of Contribution (\$) \$100.00

6 Contributor address; City; State; Zip Code
205 Madison Square
Colleyville, TX 76034

8 Principal occupation / Job title (See Instructions)
Sales

9 Employer (See Instructions)
Oracle

Date
03/31/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Webb, Stephen

Amount of Contribution (\$) \$100.00

Contributor address; City; State; Zip Code
6402 Champion Way
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 8/21	
2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 04/09/2019	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tate, Fred	8 Amount of contribution (\$) \$337.91	9 In-kind contribution description In-Kind Donation - Bookkeeping Services and Software Subscriptions
	7 Contributor address; City; State; Zip Code 5605 Winnie Drive Colleyville, TX 76034	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CFO Shield, LLC		11 Employer (FOR NON-JUDICIAL) (See instructions) Managing Director	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/4 Rpt: 9/21		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 04/22/2019		5 Payee name Citi Card			
6 Amount (\$) \$3,201.92		7 Payee address; City; State; Zip Code P.O. Box 9001037 Louisville, KY 40290			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Credit Card Payment		(b) Description <input type="checkbox"/> Check If travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check If Austin, TX, officeholder living expense Credit Card Payment	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 04/24/2019		Candidate/Officeholder name Harland Clarke			
Amount (\$) \$20.00		Office sought Office held			
Payee name Harland Clarke		Payee address; City; State; Zip Code 15955 LaCantera Parkway San Antonio, TX 78256			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check If travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check If Austin, TX, officeholder living expense Check Printing	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 03/30/2019		Candidate/Officeholder name eFundraising Connections			
Amount (\$) \$5.00		Office sought Office held			
Payee name eFundraising Connections		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check If travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check If Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate/Officeholder name Office sought Office held					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/4 Rpt: 10/21		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 03/30/2019		5 Payee name eFundraising Connections			
6 Amount (\$) \$2.75		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/05/2019		Payee name eFundraising Connections			
Amount (\$) \$9.50		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/12/2019		Payee name eFundraising Connections			
Amount (\$) \$5.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/4 Rpt: 11/21		2 FILER NAME Steinkamp, Vanessa		3 Filer ID
4 Date 04/12/2019		5 Payee name eFundraising Connections		
6 Amount (\$) \$2.75		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 04/13/2019		Payee name eFundraising Connections		
Amount (\$) \$5.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 04/15/2019		Payee name eFundraising Connections		
Amount (\$) \$5.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/4 Rpt: 12/21		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 04/17/2019		5 Payee name eFundraising Connections			
6 Amount (\$) \$23.00		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/20/2019		Payee name eFundraising Connections			
Amount (\$) \$2.75		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/22/2019		Payee name eFundraising Connections			
Amount (\$) \$23.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F2: Sch: 1/1 Rpt: 13/21	2 FILER NAME Steinkamp, Vanessa	3 Filer ID
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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5 Date 04/24/2019	6 Payee name Campaign Short Cuts
----------------------	-------------------------------------

7 Amount (\$) \$108.25	8 Payee address; City; State; Zip Code 571 Austin Ct Coppell, TX 75019
---------------------------	--

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
-----------------------	--

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Ads
---------------------------	---	---

11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 04/23/2019	Payee name Campaign Short Cuts
--------------------	-----------------------------------

Amount (\$) \$72.53	Payee address; City; State; Zip Code 571 Austin Ct Coppell, TX 75019
------------------------	--

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter Survey Notes
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/7 Rpt: 14/21	2 FILER NAME Steinkamp, Vanessa	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 04/01/2019	6 Payee name 91 Design
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7 Amount (\$) \$736.10	8 Payee address; City; State; Zip Code 4115 Steeplechase Drive Colleyville, TX 76034
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
-----------------------	--

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 200 - 12x24 yard signs with stakes
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/01/2019	Payee name Campaign Short Cuts
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Amount (\$) \$259.80	Payee address; City; State; Zip Code 571 Austin Ct Coppell, TX 75019
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Applications and Communications Rental Subscription Set up Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 2/7 Rpt: 15/21	2 FILER NAME Steinkamp, Vanessa	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 03/29/2019	6 Payee name Facebook
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7 Amount (\$) \$25.00	8 Payee address; City; State; Zip Code 1601 S. California Avenue Palo Alto, CA 94304
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
-----------------------	--

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Promotion
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/02/2019	Payee name Facebook
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 1601 S. California Avenue Palo Alto, CA 94304
------------------------	--

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Promotion
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 3/7 Rpt: 16/21	2 FILER NAME Steinkamp, Vanessa	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 04/07/2019	6 Payee name Facebook
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7 Amount (\$) \$11.74	8 Payee address; City; State; Zip Code 1601 S. California Avenue Palo Alto, CA 94304
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
-----------------------	--

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Promotion
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/22/2019	Payee name Facebook
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Amount (\$) \$35.00	Payee address; City; State; Zip Code 1601 S. California Avenue Palo Alto, CA 94304
------------------------	--

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Promotion
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 4/7 Rpt: 17/21	2 FILER NAME Steinkamp, Vanessa	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 04/23/2019	6 Payee name Facebook
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7 Amount (\$) \$50.00	8 Payee address; City; State; Zip Code 1601 S. California Avenue Palo Alto, CA 94304
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Promotion
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/18/2019	Payee name Little Giant Printers
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Amount (\$) \$3,244.26	Payee address; City; State; Zip Code 7905 Boulevard 26 North Richland Hills, TX 76180
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 4x4 100# Gloss Push Cards and Bulk Mailing
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 5/7 Rpt: 18/21		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$	
5 Date 04/18/2019		6 Payee name Little Giant Printers			
7 Amount (\$) \$3,244.26		8 Payee address; City; State; Zip Code 7905 Boulevard 26 North Richland Hills, TX 76180			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
10 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 4x4 100# Gloss Push Cards and Bulk Mailing	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/07/2019		Payee name Office Depot			
Amount (\$) \$30.84		Payee address; City; State; Zip Code 201 S. Industrial Blvd Euless, TX 76040			
TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Envelopes for Mailing Letters	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 6/7 Rpt: 19/21	2 FILER NAME Steinkamp, Vanessa	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 04/07/2019	6 Payee name Target
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7 Amount (\$) \$5.94	8 Payee address; City; State; Zip Code 1401 w. Glade Road Euless, TX 76039
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Envelopes for Mailing Letters
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/06/2019	Payee name USPS
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Amount (\$) \$385.00	Payee address; City; State; Zip Code 1501 Hall Johnson Road Colleyville, TX 76034
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage for Letters
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 7/7 Rpt: 20/21		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$	
5 Date 03/29/2019		6 Payee name Wix.Com Inc			
7 Amount (\$) \$24.00		8 Payee address; City; State; Zip Code 500 Terry Francois Blvd San Francisco, CA 94158			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
10 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate/Officeholder name		Office sought		Office held	

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 21/21

2 FILER NAME

Steinkamp, Vanessa

3 Filer ID

4 Date
04/12/2019

5 Name of person from whom amount is received
Frost Bank

8 Amount (\$) \$0.39

6 Address of person from whom amount is received; City; State; Zip Code
205 Main Street
PO Box 398
Frost, MN 56033

7 Purpose for which amount is received
Interest Payment

☐ Check if political contribution returned to filer

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 48
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Vanessa	<div style="border: 2px solid black; padding: 5px; text-align: center;"> OFFICE USE ONLY RECEIVED APR 04 2019 CITY SECRETARY'S OFFICE </div>	
	NICKNAME LAST SUFFIX Steinkamp		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 1313 Ashford Court Colleyville, TX 76034		Date Hand-Delivered or Date Postmarked
			Receipt # Amount
			Date Processed
			Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Frederick C.		
	NICKNAME LAST SUFFIX Tate		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1005 Glade Road, Suite 145, Colleyville, TX 76034		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 405-7719		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 02/08/2019 03/25/2019		
10 ELECTION	ELECTION DATE Month Day Year 05/04/2019	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) None	12 OFFICE SOUGHT (if known) Colleyville City Council, Place 2	

GO TO PAGE 2

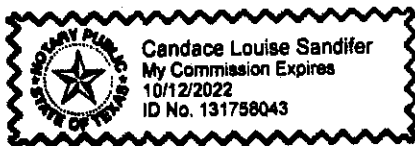
CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2 of 48

13 C / OH NAME Steinkamp, Vanessa		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 98.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 12,765.60
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 3,953.19
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 10,574.01
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1.00

17 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Vanessa Steinkamp, this the 4th day of April, 20 19, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering

Candace Sandifer
Printed name of officer administering

Notary Public
Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

3 of 48

18 FILER NAME

Steinkamp, Vanessa

19 Filer ID**20 SCHEDULE SUBTOTALS**

NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 11,123.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,642.60
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 1.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 550.13
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 3,201.92
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 201.14
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.14

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/17 Rpt: 4/48
2 FILER NAME Steinkamp, Vanessa		3 Filer ID
4 Date 03/20/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Jennifer <hr/> 6 Contributor address; City; State; Zip Code 5109 Preservation Avenue Colleyville, TX 76034	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Homemaker
Date 02/22/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barron, Brian <hr/> Contributor address; City; State; Zip Code 3908 Stonehaven Drive Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Bioreference
Date 03/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barron, Michelle <hr/> Contributor address; City; State; Zip Code 3908 Stonehaven Drive Colleyville, TX 76034	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Medical Services Rep		Employer (See Instructions) Nevro
Date 03/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauer, Mandie <hr/> Contributor address; City; State; Zip Code 7113 Waldon Court Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) GCISD
Date 03/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauer, Tari <hr/> Contributor address; City; State; Zip Code 609 Colts Neck Court Colleyville, TX 76034	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) First United Methodist Church

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 2/17 Rpt: 5/48

2 FILER NAME

Steinkamp, Vanessa

3 Filer ID

4 Date
02/10/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Birdwell, Courtney

6 Contributor address; City; State; Zip Code

305 Oak Crest Hill Drive

Colleyville, TX 76034

7 Amount of Contribution (\$)

\$100.00

8 Principal occupation / Job title (See Instructions)

Director

9 Employer (See Instructions)

Exansoft

Date
03/03/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Brandt, Laura

Contributor address; City; State; Zip Code

164 Leonard Wood South Unit 211

Highland Park, IL 60035

Amount of Contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Homemaker

Employer (See Instructions)

Homemaker

Date
03/04/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Brandt, Laura

Contributor address; City; State; Zip Code

164 Leonard Wood South Unit 211

Highland Park, IL 60035

Amount of Contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Homemaker

Employer (See Instructions)

Homemaker

Date
02/11/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Browing, Chase

Contributor address; City; State; Zip Code

1004 W Irvine Road

Phoenix, AZ 85086

Amount of Contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Banker

Employer (See Instructions)

BBVA Compass Bank

Date
03/02/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Buchwald, Trip

Contributor address; City; State; Zip Code

1309 Ashford Court

Colleyville, TX 76034

Amount of Contribution (\$)

\$250.00

Principal occupation / Job title (See Instructions)

Insurance

Employer (See Instructions)

State Farm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/17 Rpt: 6/48
2 FILER NAME Steinkamp, Vanessa		3 Filer ID
4 Date 02/10/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bundy, Kathleen <hr/> 6 Contributor address; City; State; Zip Code 4604 Mill Wood Drive Colleyville, TX 76034	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Commercial Banker		9 Employer (See Instructions) Legacy Texas Bank
Date 03/19/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Nancy <hr/> Contributor address; City; State; Zip Code 6621 Whittier Lane Colleyville, TX 76034	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/11/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbett, Rachel <hr/> Contributor address; City; State; Zip Code 200 White Drive Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Texas Health
Date 02/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Costa Beatty, Catherine <hr/> Contributor address; City; State; Zip Code 1803 Denison Road Naperville, IL 60565	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Invesco
Date 02/11/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Leslie <hr/> Contributor address; City; State; Zip Code 101 Mill Valley Drive West Colleyville, TX 76034	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) DOT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/17 Rpt: 7/48
2 FILER NAME Steinkamp, Vanessa		3 Filer ID
4 Date 02/12/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denson, Emily <hr/> 6 Contributor address; City; State; Zip Code 5309 Rustic Trail Colleyville, TX 76034	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Entrepreneur		9 Employer (See Instructions) Entrepreneur
Date 03/23/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DiGaetano, Jennifer <hr/> Contributor address; City; State; Zip Code 101 Mill Crossing East Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 02/11/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Díaz, Dawn <hr/> Contributor address; City; State; Zip Code 2804 Walnut Lane Hurst, TX 76054	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Kastner Land Services
Date 02/12/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Do, Mia <hr/> Contributor address; City; State; Zip Code 1022 Lakeridge Court Colleyville, TX 76034	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Independent Consultant Lawyer		Employer (See Instructions) Self Employed
Date 03/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Do, Thoai <hr/> Contributor address; City; State; Zip Code 3404 Middleton Way Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Citi

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/17 Rpt: 8/48
2 FILER NAME Steinkamp, Vanessa		3 Filer ID
4 Date 02/22/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duanhoe, Danielle 6 Contributor address; City; State; Zip Code 1620 Dorset Drive Colleyville, TX 76034	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) American		9 Employer (See Instructions) Flight Attendant
Date 02/10/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Caroline Contributor address; City; State; Zip Code 5108 Apple Valley Drive Colleyville, TX 76034	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 03/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Caroline Contributor address; City; State; Zip Code 5108 Apple Valley Drive Colleyville, TX 76034	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 02/24/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Cole Contributor address; City; State; Zip Code 5108 Apple Valley Colleyville, TX 76034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Whitney Penn
Date 03/02/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fersing, Jan Contributor address; City; State; Zip Code 3800 Trailwood Lane Fort Worth, TX 76109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 6/17 Rpt: 9/48

2 FILER NAME

Steinkamp, Vanessa

3 Filer ID

4 Date
02/10/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Fisher, Erica

7 Amount of Contribution (\$)
\$50.00

6 Contributor address; City; State; Zip Code
2600 Jenny Lane
Euless, TX 76039

8 Principal occupation / Job title (See Instructions)
Administrator

9 Employer (See Instructions)
BrightView Landscape Services

Date
02/14/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Ghalibaf, Cindy

Amount of Contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
5700 Miramar Lane
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date
03/24/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Gibson, Kelley

Amount of Contribution (\$)
\$50.00

Contributor address; City; State; Zip Code
6115 Theresa Lane
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)
Technology Manager

Employer (See Instructions)
Adobe

Date
03/20/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Goldsberry, Jenyphr

Amount of Contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
204 Mill Wood Drive
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)
Nurse

Employer (See Instructions)
Self-Employed

Date
02/12/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Hammons, Liz

Amount of Contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
4613 Manning Drive
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)
Self-Employed

Employer (See Instructions)
Scout and Celler

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/17 Rpt: 10/48
2 FILER NAME Steinkamp, Vanessa		3 Filer ID
4 Date 03/20/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammons, Liz 6 Contributor address; City; State; Zip Code 4613 Manning Drive Colleyville, TX 76034	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Self-Employed		9 Employer (See Instructions) Scout and Celler
Date 03/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Mark Contributor address; City; State; Zip Code 1421 Douglas Avenue Colleyville, TX 76034	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Elbit Systems of America
Date 03/03/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Martha Contributor address; City; State; Zip Code 5604 Baybreeze Drive Flower Mound, TX 75028	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions) Regent Insurance Group
Date 02/09/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Tom Contributor address; City; State; Zip Code 1717 Avondale Drive Colleyville, TX 76034	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Deep Thinker		Employer (See Instructions) Self-Employed
Date 02/11/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hashem D.D.S, MS, Robbie Contributor address; City; State; Zip Code 2501 Kensington Place Colleyville, TX 76034	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Orthodontist		Employer (See Instructions) Self-Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 8/17 Rpt: 11/48

2 FILER NAME

Steinkamp, Vanessa

3 Filer ID

4 Date
03/20/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Heitman, Megan

7 Amount of Contribution (\$)
\$40.00

6 Contributor address; City; State; Zip Code
400 Oak Crest Hill Drive
Colleyville, TX 76034

8 Principal occupation / Job title (See Instructions)
Respiratory Therapist

9 Employer (See Instructions)
Emerus

Date
02/11/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Hewitt, Lori

Amount of Contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
1308 Ashford Court
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)
Offering Manager

Employer (See Instructions)
IBM

Date
03/20/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Hickson, Andrea

Amount of Contribution (\$)
\$40.00

Contributor address; City; State; Zip Code
4500 Alexandra Drive
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)
Homemaker

Employer (See Instructions)
Homemaker

Date
03/20/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Hughes, Hedi

Amount of Contribution (\$)
\$40.00

Contributor address; City; State; Zip Code
7305 Vanguard Court
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)
Embryologist

Employer (See Instructions)
Plano Hospital

Date
02/11/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Hunt, Chris

Amount of Contribution (\$)
\$500.00

Contributor address; City; State; Zip Code
4000 Stonehaven Drive
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Baker Botts

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/17 Rpt: 12/48
2 FILER NAME Steinkamp, Vanessa		3 Filer ID
4 Date 03/20/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Lauren <hr/> 6 Contributor address; City; State; Zip Code 4000 Stonehaven Drive Colleyville, TX 76034	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Homemaker
Date 03/17/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Jessica <hr/> Contributor address; City; State; Zip Code 3102 Scarborough Lane West Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Arthur J Gallagher
Date 03/25/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Laura <hr/> Contributor address; City; State; Zip Code 4609 Green Oaks Drive Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self-Employed
Date 03/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Jade <hr/> Contributor address; City; State; Zip Code 5517 Valley View Drive West Colleyville, TX 76034	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Director of Operations		Employer (See Instructions) J&J Plumbing Services
Date 03/04/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Marvin <hr/> Contributor address; City; State; Zip Code PO Box 2356 Oxford, MS 38655	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Mississippi

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Steinkamp, Vanessa

3 Filer ID

4 Date
02/24/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Knaus, Kelley

6 Contributor address; City; State; Zip Code

313 Llyod Circle

Colleyville, TX 76034

7 Amount of Contribution (\$)
\$25.00

8 Principal occupation / Job title (See Instructions)

Homemaker

9 Employer (See Instructions)

Homemaker

Date
02/09/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Lee, Roger

Contributor address; City; State; Zip Code

4816 Carmel Place

Colleyville, TX 76034

Amount of Contribution (\$)
\$500.00

Principal occupation / Job title (See Instructions)

CEO

Employer (See Instructions)

DR2Marketing

Date
02/12/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Leopold, Sarah

Contributor address; City; State; Zip Code

1209 Somerset Boulevard

Colleyville, TX 76034

Amount of Contribution (\$)
\$200.00

Principal occupation / Job title (See Instructions)

Homemaker

Employer (See Instructions)

Homemaker

Date
02/24/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Mastagni, Danee

Contributor address; City; State; Zip Code

4108 Pembroke Parkway West

Colleyville, TX 76034

Amount of Contribution (\$)
\$500.00

Principal occupation / Job title (See Instructions)

Consultant

Employer (See Instructions)

Self-Employed

Date
03/20/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Mavis, Beverly

Contributor address; City; State; Zip Code

4301 Greenmeadow East

Colleyville, TX 76034

Amount of Contribution (\$)
\$80.00

Principal occupation / Job title (See Instructions)

Homemaker

Employer (See Instructions)

Homemaker

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/17 Rpt: 14/48
2 FILER NAME Steinkamp, Vanessa		3 Filer ID
4 Date 02/10/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meadows, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code 3900 Spring Hollow Street Colleyville, TX 76034	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self-Employed
Date 02/27/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meek, Karl <hr/> Contributor address; City; State; Zip Code 6204 Rock Dove Circle Colleyville, TX 76034	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meek, Karl <hr/> Contributor address; City; State; Zip Code 6204 Rock Dove Circle Colleyville, TX 76034	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/11/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michon, Monica <hr/> Contributor address; City; State; Zip Code 3229 High Meadow Drive Grapevine, TX 76051	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Cardlytics
Date 03/08/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Louis <hr/> Contributor address; City; State; Zip Code 6404 Talbot Trail Colleyville, TX 76034	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 12/17 Rpt: 15/48

2 FILER NAME

Steinkamp, Vanessa

3 Filer ID

4 Date
02/11/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Mishra, Iva

7 Amount of Contribution (\$)
\$200.00

6 Contributor address; City; State; Zip Code
217 Mill Crossing West
Colleyville, TX 76034

8 Principal occupation / Job title (See Instructions)
Business Coaching & Consulting

9 Employer (See Instructions)
EQ Consulting LLC

Date
03/20/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Mishra, Iva

Amount of Contribution (\$)
\$20.00

Contributor address; City; State; Zip Code
217 Mill Crossing West
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)
Business Coaching & Consulting

Employer (See Instructions)
EQ Consulting LLC

Date
03/20/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Mogged Jr, Charles

Amount of Contribution (\$)
\$30.00

Contributor address; City; State; Zip Code
1217 Tuscany Drive
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date
02/11/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Nelson, Jill

Amount of Contribution (\$)
\$200.00

Contributor address; City; State; Zip Code
608 Leta Lane
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)
Project Manager

Employer (See Instructions)
Alight Solutions

Date
03/20/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Nelson, John

Amount of Contribution (\$)
\$200.00

Contributor address; City; State; Zip Code
4602 Mill Wood Drive
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)
Realtor

Employer (See Instructions)
Randy White RealEstate Service

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/17 Rpt: 16/48
2 FILER NAME Steinkamp, Vanessa		3 Filer ID
4 Date 03/20/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Robert <hr/> 6 Contributor address; City; State; Zip Code 608 Leta Lane Colleyville, TX 76034	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Bell Helicopter
Date 03/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pechesky, Danielle <hr/> Contributor address; City; State; Zip Code 4510 Shadywood Lane Colleyville, TX 76034	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 03/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purandare, Ajit <hr/> Contributor address; City; State; Zip Code 1109 Riverwalk Court Colleyville, TX 76034	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Analyst Consultant		Employer (See Instructions) Finastra
Date 02/10/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Debbie <hr/> Contributor address; City; State; Zip Code 7327 Cedar Court Colleyville, TX 76034	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 03/22/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roppolo, Sunni <hr/> Contributor address; City; State; Zip Code 4001 Windermere Drive Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Registered Dental Hygienist		Employer (See Instructions) Colleyville Dental Care

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 14/17 Rpt: 17/48

2 FILER NAME

Steinkamp, Vanessa

3 Filer ID

4 Date
03/20/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Rutledge, Courtney

6 Contributor address; City; State; Zip Code
609 Birdlewood South

Colleyville, TX 76034

7 Amount of Contribution (\$)

\$15.00

8 Principal occupation / Job title (See Instructions)
Homemaker

9 Employer (See Instructions)
Homemaker

Date
02/10/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Sackson, Jennifer

Contributor address; City; State; Zip Code
1511 Caldwell Creek Drive

Colleyville, TX 76034

Amount of Contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)
Sales & Marketing

Employer (See Instructions)
BNSF Railway

Date
02/09/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Sexton, Lee Anne

Contributor address; City; State; Zip Code
3612 Greenbriar Court

Colleyville, TX 76034

Amount of Contribution (\$)

\$300.00

Principal occupation / Job title (See Instructions)
Managing Director

Employer (See Instructions)
Donnelley Financial

Date
02/12/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Silverman, Stacey

Contributor address; City; State; Zip Code
3309 Burning Drive

Grapevine, TX 76051

Amount of Contribution (\$)

\$50.00

Principal occupation / Job title (See Instructions)
Vice President

Employer (See Instructions)
Citi

Date
03/23/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Skinner, Valerie

Contributor address; City; State; Zip Code
4100 Oxford Court

Colleyville, TX 76034

Amount of Contribution (\$)

\$250.00

Principal occupation / Job title (See Instructions)
Philanthropist

Employer (See Instructions)
Holloway Family Foundation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/17 Rpt: 18/48
2 FILER NAME Steinkamp, Vanessa		3 Filer ID
4 Date 02/25/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Charlotte <hr/> 6 Contributor address; City; State; Zip Code 4312 Green Meadow Street West Colleyville, TX 76034	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) PECI
Date 02/09/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spivey, Christy <hr/> Contributor address; City; State; Zip Code 3907 Martin Parkway Colleyville, TX 76034	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas-Austin
Date 03/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stach, Marc <hr/> Contributor address; City; State; Zip Code 3910 Stonehaven Drive Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Vaughn & Ramsey
Date 02/26/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steinkamp, Jay <hr/> Contributor address; City; State; Zip Code 1313 Ashford Court Colleyville, TX 76034	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Wholesaler		Employer (See Instructions) Financial Firm
Date 02/11/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturgeon, Lisa <hr/> Contributor address; City; State; Zip Code 1308 Ashford Court Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Marketing Director		Employer (See Instructions) Allstate

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 16/17 Rpt: 19/48

2 FILER NAME

Steinkamp, Vanessa

3 Filer ID

4 Date
03/02/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Swaim Sr, Floyd

7 Amount of Contribution (\$)
\$50.00

6 Contributor address; City; State; Zip Code
PO Box 8
Colleyville, TX 76034

8 Principal occupation / Job title (See Instructions)
Retired

9 Employer (See Instructions)
Retired

Date
03/16/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Vallhonrat, Paul

Amount of Contribution (\$)
\$50.00

Contributor address; City; State; Zip Code
6510 Connie Lane
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)
Landman

Employer (See Instructions)
Harold Winks Vallhonrat LLC

Date
03/20/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Weimholt, Shannon

Amount of Contribution (\$)
\$50.00

Contributor address; City; State; Zip Code
5600 Valley View Drive North
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)
CEO

Employer (See Instructions)
Weimy Cutlery

Date
03/21/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Wendt, Tracey

Amount of Contribution (\$)
\$50.00

Contributor address; City; State; Zip Code
4900 Wildwood Court
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)
Owner

Employer (See Instructions)
GTFAS

Date
03/20/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Westfall, Natalie

Amount of Contribution (\$)
\$20.00

Contributor address; City; State; Zip Code
1617 Dorset Drive
Colleyville, TX 76034

Principal occupation / Job title (See Instructions)
Homemaker

Employer (See Instructions)
Homemaker

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 17/17 Rpt: 20/48

2 FILER NAME
Steinkamp, Vanessa

3 Filer ID

4 Date
03/04/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Wright, Courtney

7 Amount of Contribution (\$)
\$150.00

6 Contributor address; City; State; Zip Code
212 N, Grant Street
Hinsdale, IL 60521

8 Principal occupation / Job title (See Instructions)
Finance

9 Employer (See Instructions)
HSBC

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:
Sch: 1/2 Rpt: 21/48

2 FILER NAME
Steinkamp, Vanessa

3 Filer ID

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date
03/25/2019

6 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Cleveland, Lauren
7 Contributor address; City; State; Zip Code
4012 Ambleside Ct.
Colleyville, TX 76034

8 Amount of contribution (\$) \$750.00
9 In-kind contribution description
Development of Campaign Logo
☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)
Marketing Guru

11 Employer (FOR NON-JUDICIAL) (See instructions)
Envision Works, Inc.

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date
03/07/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Do, Kathy
Contributor address; City; State; Zip Code
6400 Los Colinas Boulevard
Irving, TX 75039

Amount of contribution (\$) \$400.00
In-kind contribution description
Professional/Corporate Photos
☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)
Senior Analysts

Employer (FOR NON-JUDICIAL) (See instructions)
Citi Group

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date
03/21/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Sexton, Lee Anne
Contributor address; City; State; Zip Code
3438 Blueberry Lane
Grapevine, TX 76051

Amount of contribution (\$) \$478.44
In-kind contribution description
Food & Beverage for Kick-off Event
☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)
Managing Director

Employer (FOR NON-JUDICIAL) (See instructions)
Donnelley Financial

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/2 Rpt: 22/48	
2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 03/10/2019	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tate, Fred	8 Amount of contribution (\$) \$14.16	9 In-kind contribution description Bookkeeping Services and Software Subscription
	7 Contributor address; City; State; Zip Code 5605 Winnie Drive Colleyville, TX 76034	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Managing Director		11 Employer (FOR NON-JUDICIAL) (See instructions) CFO Shield, LLC	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
Sch: 1/1 Rpt: 23/48

2 FILER NAME

Steinkamp, Vanessa

3 Filer ID

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan
02/08/2019

7 Name of lender
Steinkamp, Vanessa

☐ out-of-state PAC (ID#:

9 Loan Amount (\$)

\$1.00

6 Is lender a
financial
institution?
No

8 Lender address; City; State; Zip Code
1313 Ashford Court

10 Interest Rate

11 Maturity Date

Colleyville, TX 76034

12 Principal occupation / Job title (See Instructions)
Educator

13 Employer (See Instructions)
Tarrant County College

14 Description of Collateral
☒ None

15 Check if personal funds were deposited into political account
(See Instructions)
☒

16 GUARANTOR
INFORMATION

☒ not applicable

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

20 Principal occupation

21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/17 Rpt: 24/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 03/25/2019		5 Payee name Robbins, Connor			
6 Amount (\$) \$200.00		7 Payee address; City; State; Zip Code 7327 Cedar Court Colleyville, TX 76034			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Picking up & transporting political signs	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/09/2019		Payee name eFundraising Connections			
Amount (\$) \$9.50		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/09/2019		Payee name eFundraising Connections			
Amount (\$) \$23.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/17 Rpt: 25/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 02/09/2019		5 Payee name eFundraising Connections			
6 Amount (\$) \$5.00		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/09/2019		Payee name eFundraising Connections			
Amount (\$) \$14.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/10/2019		Payee name eFundraising Connections			
Amount (\$) \$5.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/17 Rpt: 26/48	2 FILER NAME Steinkamp, Vanessa	3 Filer ID
4 Date 02/10/2019	5 Payee name eFundraising Connections	
6 Amount (\$) \$5.00	7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/10/2019	Candidate/Officeholder name	Office sought
Amount (\$) \$5.00	Office held	
Date 02/10/2019	Payee name eFundraising Connections	
Amount (\$) \$5.00	Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/10/2019	Candidate/Officeholder name	Office sought
Amount (\$) \$2.75	Office held	
Date 02/10/2019	Payee name eFundraising Connections	
Amount (\$) \$2.75	Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/10/2019	Candidate/Officeholder name	Office sought
Amount (\$) \$2.75	Office held	
Date 02/10/2019	Payee name eFundraising Connections	
Amount (\$) \$2.75	Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/10/2019	Candidate/Officeholder name	Office sought
Amount (\$) \$2.75	Office held	
Date 02/10/2019	Payee name eFundraising Connections	
Amount (\$) \$2.75	Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/17 Rpt: 27/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 02/10/2019		5 Payee name eFundraising Connections			
6 Amount (\$) \$5.00		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/10/2019		Payee name eFundraising Connections			
Amount (\$) \$5.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/10/2019		Payee name eFundraising Connections			
Amount (\$) \$5.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/10/2019		Payee name eFundraising Connections			
Amount (\$) \$5.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/17 Rpt: 28/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 02/11/2019		5 Payee name eFundraising Connections			
6 Amount (\$) \$5.00		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/11/2019		Payee name eFundraising Connections			
Amount (\$) \$5.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/11/2019		Payee name eFundraising Connections			
Amount (\$) \$5.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/11/2019		Payee name eFundraising Connections			
Amount (\$) \$5.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/17 Rpt: 29/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID
4 Date 02/11/2019		5 Payee name eFundraising Connections		
6 Amount (\$) \$2.75		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 02/11/2019		Payee name eFundraising Connections		
Amount (\$) \$23.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 02/11/2019		Payee name eFundraising Connections		
Amount (\$) \$9.50		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solidation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/17 Rpt: 30/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 02/11/2019		5 Payee name eFundraising Connections			
6 Amount (\$) \$9.50		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/11/2019		Payee name eFundraising Connections			
Amount (\$) \$5.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/11/2019		Payee name eFundraising Connections			
Amount (\$) \$2.75		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/17 Rpt: 31/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID
4 Date 02/12/2019		5 Payee name eFundraising Connections		
6 Amount (\$) \$5.00		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 02/12/2019		Payee name eFundraising Connections		
Amount (\$) \$9.50		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 02/12/2019		Payee name eFundraising Connections		
Amount (\$) \$9.50		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 02/12/2019		Payee name eFundraising Connections		
Amount (\$) \$9.50		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solidation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/17 Rpt: 32/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 02/12/2019		5 Payee name eFundraising Connections			
6 Amount (\$) \$2.75		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/13/2019		Payee name eFundraising Connections			
Amount (\$) \$5.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/14/2019		Payee name eFundraising Connections			
Amount (\$) \$5.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/17 Rpt: 33/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 02/15/2019		5 Payee name eFundraising Connections			
6 Amount (\$) \$5.00		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/22/2019		Payee name eFundraising Connections			
Amount (\$) \$2.75		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/22/2019		Payee name eFundraising Connections			
Amount (\$) \$2.75		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/17 Rpt: 34/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID
4 Date 02/24/2019		5 Payee name eFundraising Connections		
6 Amount (\$) \$23.00		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 02/24/2019		Payee name eFundraising Connections		
Amount (\$) \$1.63		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 02/24/2019		Payee name eFundraising Connections		
Amount (\$) \$0.95		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/17 Rpt: 35/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 02/25/2019		5 Payee name eFundraising Connections			
6 Amount (\$) \$11.75		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 02/26/2019		Payee name eFundraising Connections			
Amount (\$) \$23.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	
Date 03/03/2019		Payee name eFundraising Connections			
Amount (\$) \$2.75		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/17 Rpt: 36/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 03/03/2019		5 Payee name eFundraising Connections			
6 Amount (\$) \$5.00		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/04/2019		Payee name eFundraising Connections			
Amount (\$) \$5.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/04/2019		Payee name eFundraising Connections			
Amount (\$) \$2.75		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/17 Rpt: 37/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 03/06/2019		5 Payee name eFundraising Connections			
6 Amount (\$) \$7.25		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/08/2019		Payee name eFundraising Connections			
Amount (\$) \$9.50		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/10/2019		Payee name eFundraising Connections			
Amount (\$) \$2.75		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/17 Rpt: 38/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 03/17/2019		5 Payee name eFundraising Connections			
6 Amount (\$) \$2.75		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/19/2019		Payee name eFundraising Connections			
Amount (\$) \$23.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/20/2019		Payee name eFundraising Connections			
Amount (\$) \$5.00		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/17 Rpt: 39/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 03/20/2019		5 Payee name eFundraising Connections			
6 Amount (\$) \$2.30		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/21/2019		Payee name eFundraising Connections			
Amount (\$) \$2.75		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	
Date 03/22/2019		Payee name eFundraising Connections			
Amount (\$) \$2.75		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/17 Rpt: 40/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 03/23/2019		5 Payee name eFundraising Connections			
6 Amount (\$) \$2.75		7 Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/23/2019		Payee name eFundraising Connections			
Amount (\$) \$11.75		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/24/2019		Payee name eFundraising Connections			
Amount (\$) \$2.75		Payee address; City; State; Zip Code 2831 G Street Suite 120 Sacramento, CA 95816			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense efundraising Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/5 Rpt: 41/48	2 FILER NAME Steinkamp, Vanessa	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 03/06/2019	6 Payee name Designer Graphics
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7 Amount (\$) \$699.21	8 Payee address; City; State; Zip Code 12404 Hwy 155 South Tyler, TX 75703
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Signs 24 x 12 No Grommets
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/06/2019	Payee name Designer Graphics
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Amount (\$) \$927.66	Payee address; City; State; Zip Code 12404 Hwy 155 South Tyler, TX 75703
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Signs 48 x 48
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 2/5 Rpt: 42/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD					\$
5 Date 03/15/2019		6 Payee name Facebook			
7 Amount (\$) \$25.00		8 Payee address; City; State; Zip Code 1601 S. California Avenue Palo Alto, CA 94304			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
10 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Promotion	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 03/20/2019		Candidate/Officeholder name Goody Goody Liquor			
Amount (\$) \$63.51		Office sought 4701 Colleyville Blvd # 300 Colleyville, TX 76034			
TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Beverages for Kick-Off Campaign Event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate/Officeholder name Office sought Office held					

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 3/5 Rpt: 43/48	2 FILER NAME Steinkamp, Vanessa	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 03/19/2019	6 Payee name Little Giant Printers
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7 Amount (\$) \$817.36	8 Payee address; City; State; Zip Code 7905 Boulevard 26 North Richland Hills, TX 76180
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Push Cards
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/20/2019	Payee name Lowe's
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Amount (\$) \$40.05	Payee address; City; State; Zip Code 201 North Kimball Avenue Southlake, TX 76092
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 37 - H Bracket Sign Holders
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 4/5 Rpt: 44/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$	
5 Date 03/20/2019		6 Payee name Lowe's			
7 Amount (\$) \$58.46		8 Payee address; City; State; Zip Code 6200 Long Prairie Road Flower Mound, TX 75028			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
10 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 54 - H Bracket Sign Holders	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 03/08/2019		Candidate/Officeholder name ProForma Select			
Amount (\$) \$499.30		Payee address; City; State; Zip Code PO Box 640814 Cincinnati, OH 45264			
TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 75 - Screen Print Shirts	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate/Officeholder name Office sought Office held					

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 5/5 Rpt: 45/48	2 FILER NAME Steinkamp, Vanessa	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 03/04/2019	6 Payee name USPS
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7 Amount (\$) \$11.00	8 Payee address; City; State; Zip Code 1501 Hall Johnson Road Colleyville, TX 76034
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps for Thank You Letters
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/19/2019	Payee name Westlake Hardware
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Amount (\$) \$60.37	Payee address; City; State; Zip Code 4701 Colleyville Boulevard, Suite 100 Colleyville, TX 76034
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Post Driver, Cable Ties
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
Q'THER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/2 Rpt: 46/48		2 FILER NAME Steinkamp, Vanessa		3 Filer ID	
4 Date 03/17/2019		5 Payee name Lowe's			
6 Amount (\$) \$89.63 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 3000 State Highway 121 Euless, TX 76039			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 60 - H Bracket Sign Holders	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/23/2019		Payee name Lowe's			
Amount (\$) \$60.52 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 600 N. Tarrant Parkway Keller, TX 76248			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 56 - H Bracket Sign Holders	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/18/2019		Payee name Lowe's			
Amount (\$) \$35.85 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 770 Grapevine Highway Hurst, TX 76054			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 24 - H Bracket Sign Holders	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By
- Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/2 Rpt: 47/48	2 FILER NAME Steinkamp, Vanessa	3 Filer ID
4 Date 03/23/2019	5 Payee name Westlake Hardware	
6 Amount (\$) \$15.14 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 4701 Colleyville Boulevard, Suite 100 Colleyville, TX 76034	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cable Ties
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 48/48

2 FILER NAME
Steinkamp, Vanessa

3 Filer ID

4 Date
02/28/2019

5 Name of person from whom amount is received
Frost Bank

8 Amount (\$)
\$0.14

6 Address of person from whom amount is received; City; State; Zip Code
205 Main Street
PO Box 398
Frost, MN 56033

7 Purpose for which amount is received
Interest Earned

☐ Check if political contribution returned to filer